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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
_	Aycox, Kevin, Michael, ,										
	(b) Address (number and street) 450 Harrison Road	t)				Candidate's FEC Identification Number H8MS03174					
	City, State, and ZIP Code					3. Is This	X Nev	V		Amended	
	Newton							OR		(A)	
4.	Party Affiliation	5. Office Soug	ght			rict of Candidate					
	DEMOCRATIC PARTY	House			MS	03					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
Michael Aycox for Congress											
	(b) Address (number and street) PO Box 467										
	(c) City, State, and ZIP Code										
	Newton				MS	39345					
(Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal committee.											
NOTE: This designation should be filed with the principal campaign committee.											
	(a) Name of Committee (in full)										
(b) Address (number and street)											
(c) City, State, and ZIP Code											
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
	gnature of Candidate					Date				•	
<i>A</i> ;	ycox, Michael, , ,	[Electronically Filed]				03/13/2018					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											

FEC FORM 2 (REV. 02/2009)